

## FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

<b>Title of Invention</b>	High Volume Density Polycrystalline Diamond With Working Surfaces Depleted Of Catalyzing Material																						
Application Number :																							
Date :																							
First Named Applicant:		Mr. Nigel Dennis Griffin																					
Attorney Docket Number:		78.1081-1.4																					
<b>TOTAL FEE AUTHORIZED \$ 1002</b>																							
Patent fees are subject to annual revisions on or about October 1st of each year.																							
Filing as large entity																							
BASIC FILING FEE																							
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>750</td><td>750</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 750</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	1001	750	750				Subtotal For Basic Filing Fees: \$ 750								
Fee Description	Fee Code	Amount \$	Fee Paid \$																				
Utility Filing Fee	1001	750	750																				
			Subtotal For Basic Filing Fees: \$ 750																				
EXTRA CLAIM FEES																							
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 34</td><td>14</td><td>1202</td><td>18</td><td>252</td></tr><tr><td>Independent Claims : 2</td><td>0</td><td>1201</td><td>84</td><td>0</td></tr><tr><td colspan="3"></td><td colspan="2">Subtotal For Extra Claims Fees: \$ 252</td></tr></tbody></table>				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 34	14	1202	18	252	Independent Claims : 2	0	1201	84	0				Subtotal For Extra Claims Fees: \$ 252	
Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$																			
Total Claims : 34	14	1202	18	252																			
Independent Claims : 2	0	1201	84	0																			
			Subtotal For Extra Claims Fees: \$ 252																				
<b>AUTHORIZED BILLING INFORMATION</b>																							
<b>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b>																							
Deposit account number:		180584																					
Access Code		****																					
Deposit name:		Reed Tool Co.																					
Deposit authorized name:		Jeffery E Daly																					
Signature:		Jeffery E Daly																					
Date (YYYYMMDD):		2003-07-01																					
Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.																							